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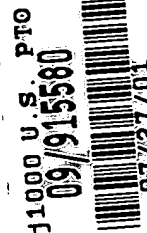
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07/27/01

Date: July 27, 2001

Docket No.: 0397-0431P

Assistant Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): UCHIDA, Shinya
KONISHI, Aya; TORII, Tsuneyoshi
NAKASHIMA, Kazuhiro

For: WHOLE BLOOD IMMUNOASSAY

Enclosed are:

☒ A specification consisting of 18 pages

☐ sheet(s) of ☐ drawings

☒ An assignment of the invention - \$40.00 Recording Fee

☐ Certified copy of Priority Document(s)

☒ Executed Declaration ☒ Original ☐ Photocopy

☐ Applicant claims small entity status in accordance with 37 CFR 1.27

☐ Application Data Sheet in accordance with 37 C.F.R. 1.76

Preliminary Amendment X Information Disclosure Statement, PTO-1449 and reference(s) Other _____ Applicant requests early publication

The filing fee has been calculated as shown below:

LARGE ENTITY

SMALL ENTITY

FOR	NO. FILED	NO. EXTRA	RATE	FEE		RATE	FEE
BASIC FEE	***** ***** *****	***** ***** *****	***** ***** *****	\$710.00	or	**** **** ****	\$355.00
TOTAL CLAIMS	10 - 20 =	0	x18 =\$	0.00	or	x 9 = \$	0.00
INDEPENDENT	1 - 3 =	0	x80 =\$	0.00	or	x 40 = \$	0.00
MULTIPLE DEPENDENT CLAIM PRESENTED <u>no</u>			+270 = \$	0.00	or	+135 = \$	0.00
				TOTAL \$	710.00	TOTAL \$	0.00

 X A check in the amount of \$ 750.00 to cover the filing fee and recording fee (if applicable) is enclosed. Please charge Deposit Account No. 02-2448 in the amount of \$_____. A triplicate copy of this transmittal form is enclosed. No fee is enclosed.

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If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 02-2448 for any additional fees required under 37 C.F.R. 1.16 or under 37 C.F.R. 1.17; particularly, extension of time fees.

Respectfully submitted,

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